


# \*RETURN TO FMF - LOCATION 7540

*Re-Edit*

QUERY CONTROL FORM		<del>RTIS USE ONLY</del>	
Application No. <u>09/782,361</u>	Prepared by <u>RWP</u>	<del>Tracking Number</del>	
Examiner-GAU <u>Teresa E. Strzelecka</u>	Date <u>5-18-94</u>	<del>Week Date</del>	
<u>1637</u>	No. of queries <u>(1) CH</u>		

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE <u>Improper Dependency - Final claim 13 depend upon higher numbered claim 18. Please resolve.</u>
a. Page Missing	
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
<i>Thanks</i>	
<b>CLAIMS</b>	
a. Claim(s) Missing	
(b) Improper Dependency	
c. Duplicate Numbers	
d. Incorrect Numbering	
e. Index Disagrees	
f. Punctuation	
g. Amendments	
h. Bracketing	
i. Missing Text	
j. Duplicate Text	
k. Other	
	initials <u>Reer</u>
	<b>RESPONSE</b> <u>Index corrected.</u>
	initials <u>DGJ</u>

<b>Issue Classification</b> 	Application No.	Applicant(s)	
	09/782,361	HU, YU-WEN	
	Examiner	Art Unit	
	Teresa E Strzelecka	1637	

ISSUE CLASSIFICATION									
ORIGINAL			CROSS REFERENCE(S)						
CLASS	SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
435	6		435	5	91.2				
INTERNATIONAL CLASSIFICATION									
C1	2	Q	1	68					
C1	2	Q	1	70					
C1	2	P	19	34					
Teresa Strzelecka 4/8/04			JEFFREY FREDMAN				Total Claims Allowed: 18		
(Assistant Examiner) (Date)			PRIMARY EXAMINER						
TRACEY D. JOHNSON 4/11/04			4/8/04				O.G. Print Claim(s)		
(Assistant Examiner) (Date)			(Primary Examiner) (Date)				1		
							O.G. Print Fig. 1		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	1		31		61		91		121		151				181
2	2		32		62		92		122		152				182
3	3		33		63		93		123		153				183
4	4		34		64		94		124		154				184
5	5		35		65		95		125		155				185
6	6		36		66		96		126		156				186
7	7		37		67		97		127		157				187
8	8		38		68		98		128		158				188
9	9		39		69		99		129		159				189
10	10		40		70		100		130		160				190
11	11		41		71		101		131		161				191
12	12		42		72		102		132		162				192
13	13		43		73		103		133		163				193
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15	15		45		75		105		135		165				195
16	16		46		76		106		136		166				196
17	17		47		77		107		137		167				197
18	18		48		78		108		138		168				198
19	19		49		79		109		139		169				199
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21	21		51		81		111		141		171				201
22	22		52		82		112		142		172				202
23	23		53		83		113		143		173				203
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26	26		56		86		116		146		176				206
27	27		57		87		117		147		177				207
28	28		58		88		118		148		178				208
29	29		59		89		119		149		179				209
30	30		60		90		120		150		180				210